

# STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation

as required by SDCL § 17-2-2.5

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

**RECEIVED**  
OCT 23 2015  
S.D. SEC. OF STATE

1. TITLE OF NEWSPAPER <b>The Faith Independent</b>		2. DATE 10-19-15
3. FREQUENCY OF ISSUE weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$37 in area/ \$42 out of area
4. COMPLETE PHYSICAL ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 106 Main Street/ PO Box 38, Faith, Meade, SD 57626-0038		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) See back of form		
6. FULL NAME OF PUBLISHER: Donald Ravellette		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME COMPLETE MAILING ADDRESS See back of form		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. NONE		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	750	750
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.	180	186
2. Mail Subscription (Paid and or requested)	431	424
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	611	610
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	41	41
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	652	651
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	81	86
2. Return from News Agents	17	13
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	750	750

**Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public**  
**I swear that the statements made by me are true, correct, and complete:**

Donald Ravellette  
 (Signature)

Public  
 (Title)

State of South Dakota )  
 County of Haakon )  
 (Seal)

Sworn to before me this 21 day of Oct, 20 15  
Jolene Haynes  
 Notary Public  
 My commission expires: 4-3-2021